

AF/3622
JW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Andrew S. Kanter Group Art Unit: 3622
Serial No.: 09/909,643 Examiner: Jeffrey D. Carlson
Filed: July 20, 2001
For: **DIRECT INTERNET ADVERTISING**
Docket No.: 0010-3

Bedminster, NJ 07921
February 10, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

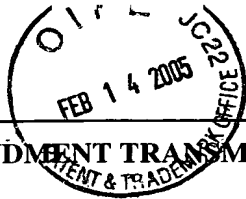
Sir:

AMENDMENT UNDER 37 CFR 1.116

In response to the Office Action dated December 10, 2004, kindly amend the above-identified application as follows:

Amendments to the Claims are set forth in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.



AMENDMENT TRANSMITTAL LETTER				ATTORNEY'S DOCKET NO.: 0010-3		
SERIAL NUMBER: 09/909,643	FILING DATE: July 20, 2001	EXAMINER: Jeffrey D. Carlson	GROUP ART UNIT: 3622			
INVENTION: DIRECT INTERNET ADVERTISING						
INVENTOR(s): Andrew S. Kanter						
TO THE ASSISTANT COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.						
CLAIMS AS AMENDED						
(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) NO. OF EXTRA CLAIMS PRESENT	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	19	MINUS	20	0	X \$25	0.00
INDEP. CLAIMS	4	MINUS	4	0	X \$100	0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0.00
<p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.</p> <p><input checked="" type="checkbox"/> No additional fee is required.</p> <p><input type="checkbox"/> Charge \$ _____ to Deposit Account No. _____. A triplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> The undersigned petitions for any extension of time for filing this document required under 37 C.F.R. 1.136 and submits a check for \$ _____ to cover the extension fee _____. A triplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> Charge any additional fees to Deposit Account No. 01-1125</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%;"><p>_____ February 10, 2005 Date</p><p>_____ (908) 901-0220 Phone</p></div><div style="width: 45%; text-align: center;"><p>_____ Signature</p><p>_____ Ernest D. Buff Attorney Name</p><p>_____ 25,833 Reg. Number</p></div></div>						
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on <u>February 10, 2005</u>.</p> <div style="text-align: center; margin-top: 20px;"><p>_____ (Signature)</p><p>_____ Ernest D. Buff Attorney of Record</p><p>_____ February 10, 2005 (Date)</p></div>						